DMH A	VATAF	R CLAIM ADJUSTMENT REASON CODES
Adjustm	Adjustm	
ent	ent	DISCRIPTION
Reason	Group	DISCINIF HOIN
Code	Code	
1	CO	Deductible Amount
3	CO	Co-Payment Amount
5	CO	Invalid POS for Procedure Code
4	CO	Invalid Combination for 837I adjudication
15	CO	Authorization is missing/invalid/ after/prior the authorization date
15	CO	Authorized units differs from billed units.
16	СО	Claim lacks info needed for adjudication (uos, date, HCPCS, PN, \$)
18	OA	Duplicate Service
22	OA	Third party payor not found in client financial eligibility record
22	OA	Missing valid Third Party Guarantor.
23	OA	Claim Level Payment/Adjustment Information Found and No Service Level Payment/Adjustment Found. Limited by third payer payments
26	CO	DOS Prior to Plan Effective Date
29	CO	The Time Limit for filing has expired
35	CO	Lifetime Benefit Maximum Reached
31	CO	Member not enrolled on date of service. Member ID is blank.
45	CO	Claimed over contracted rate
94	CO	Processed in Excess of charges.
109	OA	3rd party Payer detail is more than reported amount
109	OA	Missing Third Party Payment Information
109	OA	Missing Third Party Detail
109	OA	Third Party Coverage Found For Unknown Payer.
115	OA	Contractor Void
131	CO	Value Amount Included
133	OA	Authorization Pending/Claim needs further review
147	CO	Contracted accent/ Rate Expired/Not on File/no active
147	CO	Contract Expired - Billing Inhibited
152	CO	CPT Code Invalid for Service Duration
166	CO	Funding Source Not Eligible for DOS/missing episode
167	CO	Diagnosis Not Covered/out of range
177	CO	Client Not Eligible on Date of Service- no plan identified.
181	CO	Procedure Code Not on Fee Table/ blank
181	CO	Invalid Procedure Code/ not found in authorization
185	CO	Contracting Provider Not Linked To Authorization
197	CO	No Units left on Authorization for Procedure Code/Plan,
198	CO	Plan Coverage Levels Exhausted, no unit/visit remain

204	СО	Claim Not Covered by Plan/Funding Source, This member's authorization is for a different funding source.
273	CO	Exceeds Contracted Hours/Days/Units/amount
222	CO	Charge exceeds contract amount
A1/MA4 0	СО	Missing Admission Information
B5 OR 272	СО	Eligibility not found/verified guarantor in CalPM.
B7	CO	Performing Provider not registered on DOS